



## THE JODY HISSONG MEMORIAL FUND

### SCHOLARSHIP APPLICATION

PLEASE FILL OUT THE FOLLOWING AND INCLUDE THIS PAGE AS A COVER PAGE.

Questions 1-6 should be re-written and answered (typed) on separate sheets.

Applicant's Name \_\_\_\_\_

Date submitted \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Affiliation to Madison County or Virginia City:

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Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

E-mail address \_\_\_\_\_

1. What is your field of study, and what inspired you to choose this path?
2. Share your life story, financial situation, and any specific needs you'd like to highlight.
3. What community involvement, volunteer work, honors, or awards have you received?
4. Describe your work experience, career plans, and professional aspirations.
5. What is the estimated cost of your education, and how will you fund it? Include your contributions and other financial sources.
6. What is your ultimate goal, and is there anything else the committee should consider when reviewing your application?

Please submit by April 1, 2025.

Email to: [info@jodysfund.org](mailto:info@jodysfund.org) OR

Mail to: Jody's Fund, PO BOX 336, Virginia City, MT 59755